

MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
WILLIAM A. HINTON STATE LABORATORY INSTITUTE  
VIRUS ISOLATION LABORATORY  
305 SOUTH STREET, JAMAICA PLAIN, MA 02130

INSTRUCTIONS FOR SPECIMEN COLLECTION FOR RESPIRATORY VIRUS TESTING  
INFLUENZA SENTINEL SURVEILLANCE SITES  
(Influenza- all types, Parainfluenza, Adenovirus, RSV)

**Specimen Types:**

Specimens should only be collected on patients who meet the following criteria: Acute onset of influenza-like illness within the previous 72 hours with symptoms of fever  $>100.4^{\circ}\text{F}$  ( $37.8^{\circ}\text{C}$ ), and a cough or sore throat. Fever does not have to be present at the time of specimen collection.

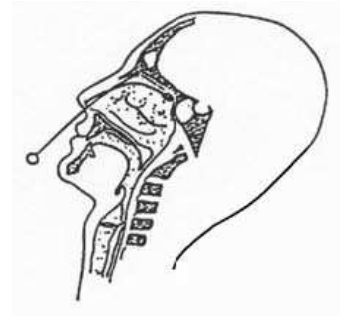
1. Influenza (all types), parainfluenza, respiratory syncytial virus or adenovirus: submit one **nasopharyngeal (NP) swab**.
2. For atypical or suspect antiviral resistant influenza, contact the MDPH Immunization Program at (617) 983-6800 prior to specimen submission for special instructions.

**Storage of Virus Isolation Kit:**

Store VI kits at  $2\text{--}25^{\circ}\text{C}$  until ready for use. **DO NOT FREEZE VTM**. For ease of use, **refrigerate the VTM at  $4^{\circ}\text{C}$**  and **separately freeze** the outer mailing fiberboard cylinder containing the ice pack and aluminum container. **To order Respiratory Virus Specimen Kits, call (617) 983-6800.**

**Specimen Collection Instructions for Nasopharyngeal (NP) Swabs:**

1. Assemble all supplies including the virus isolation kit, gloves, pen, scissors, etc.
2. Tilt the patient's head back slightly. Bend the flexible wire of the sterile NP swab in a small arc and **gently** insert the swab along the medial part of the septum, until it reaches the posterior nares.
3. Rotate the swab slightly several times to dislodge the columnar epithelial cells and then quickly remove the swab.
4. Insert the NP swab into the cold VTM, cutting the excess wire to fit inside the tube. Firmly secure the cap.
5. Place the VTM tube in the inner aluminum container (provided) and cap. Seal the Specimen Submission Form in a plastic bag and place along with the inner aluminum container(s) in the outer fiberboard cylinder or box (provided) containing the frozen ice pack.
6. Refrigerate, **do not freeze**, until transported for testing. **Specimens received 72 hrs after collection are unsuitable for testing.**



**Labeling of Primary Specimen Container:** Clearly label the VTM specimen tube with patient's name, date of birth, collection date and sample type (e.g. NP swab).

**Test Requisition Form:** Complete **all applicable information** on the Influenza Surveillance Specimen Submission Form, SS-VI-1-10, in sections 1-11. **Use one form for each specimen.** Following an Epi consult or for 2010-2011 surveillance sites, the test request in section 7 should indicate: "**Respiratory Viral Panel**" for influenza (typing), parainfluenza, RSV, and adenovirus surveillance. For influenza PCR testing only, the test request should indicate "**Influenza Typing**". For atypical or suspect antiviral resistant influenza, contact the MDPH Immunization Program at (617) 983-6800 prior to specimen submission. **Testing delays may occur** if information is missing or specimens are received without a submission form.

**Shipping Instructions:** Ship specimens without delay on frozen ice packs. NOTE: **Specimens collected  $>72$  hrs after onset are unsuitable for testing. If samples will be shipped to SLI  $\geq 3$  days from collection but are collected within 72 hrs, they should be frozen at  $<-70^{\circ}\text{C}$  and shipped on dry ice. Please note specimen storage conditions on the specimen submission form to avoid misidentification of the specimen as unsatisfactory.** Specimens should be sent to SLI either via the testing facility's courier (if available) or by utilizing the overnight shipment option from a commercial shipping provider. If neither of these options is feasible, facilities should contact an Immunization epidemiologist at (617) 983-6800 for specimen courier pickup. If testing for RSV, use a same day courier to optimize isolation of the virus.

**Ship to:**                      **Attention:** Virus Isolation Laboratory  
William A. Hinton State Laboratory Institute  
305 South Street  
Jamaica Plain, MA 02130

**Special Notes:** Test reports will be sent to the submitting facility once testing is completed.

**Questions:** Contact Massachusetts Immunization Program at (617) 983-6800.